

OCT 02 2003

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

Docket Number (Optional)
740756-2138

CERTIFICATE OF MAILING OR
TRANSMISSION
[37 CFR 1.8(a)]

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to Mail Stop _____, Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450, or being facsimile transmitted to the USPTO at _____, on _____.

Signature: _____
Name: Deborah Movahhedi

In re Application of Takayuki IKEDA et al.

Application Number 09/542,473 Filed April 4, 2000

For ELECTROOPTICAL DEVICE AND A METHOD OF
MANUFACTURING THE SAME

Group Art Unit 2826

Examiner Ahmed N. Sefer

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate entity fee are as follows
(check time period desired):

One month (37 CFR 1.17(a)(1)) - (\$55/\$110) \$ _____
 Two months (37 CFR 1.17(a)(2)) - (\$205/\$410) \$420.00
 Three months (37 CFR 1.17(a)(3)) - (\$465/\$930) \$ _____
 Four months (37 CFR 1.17(a)(4)) - (\$725/\$1450) \$ _____
 Five months (37 CFR 1.17(a)(5)) - (\$985/\$1970) \$ _____

 Applicant claims small entity status.
 A check to cover the fee is enclosed.
 Payment by credit card. Form PTO-2038 is attached.
 The Commissioner has already been authorized to charge fees in this application to a Deposit Account.
 The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 19-2380
I have enclosed a duplicate copy of this sheet.

I am the applicant/inventor

assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
 attorney or agent of record.
 attorney or agent under 37 CFR 1.34(a).
Registration number if acting under 37 CFR 1.34(a) _____.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

October 2, 2003

Date

10/21/2003 SUUANG1 00000017 192380 09542473

01 FC:1252

10.00 DA

410.00 OP

Signature

Luan C. Do, Reg. No. 38,434

Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

Total of _____ forms are submitted.

Adjustment date: 10/21/2003 SUUANG1
10/08/2003 TBESHMAH1 00000001 09542473
01 FC:1252 -410.00 OP

NVA278278.1

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410.00
10/08/2003 TBESHMAH1 00000001 09542473
10 FC:1252

FEE TRANSMITTAL FOR FY 2003

Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$410.00)

Complete if Known	
Application Number	09/542,473
Filing Date	April 4, 2000
First Named Inventor	Takayuki IKEDA et al.
Examiner Name	Ahmed N. Sefer
Art Unit	2826
Attorney Docket No.	750756-2138

OCT 02 2003

TRADEMARK OFFICE

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order Other None

Deposit Account:

Deposit Account Number

19-2380 (740756-2138)

Deposit Account Name

Nixon Peabody LLP

The Commissioner is authorized to: (check all that apply)

Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s)
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Fee Code	Fee (\$)	Small Entity Fee Code	Fee (\$)	Fee Description	Fee Paid
1001	750	2001	375	Utility filing fee	
1002	330	2002	165	Design filing fee	
1003	520	2003	260	Plant filing fee	
1004	750	2004	375	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	

SUBTOTAL (1) (\$ 0)

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Extra Claims	Fee from below	Fee Paid
Independent Claims			
Multiple Dependent			

Large Entity Fee Code	Fee (\$)	Small Entity Fee Code	Fee (\$)	Fee Description
1202	18	2202	9	Claims in excess of 20
1201	84	2201	42	Independent claims in excess of 3
1203	280	2203	140	Multiple dependent claim, if not paid
1204	84	2204	42	** Reissue independent claims over original patent
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$ 0)

** or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	
Fee Code	Fee (\$)	Fee Code	Fee (\$)
1051	130	2051	65
1052	50	2052	25
1053	130	1053	130
1812	2,520	1812	2,520
1804	920*	1804	920*
1805	1,840*	1805	1,840*
1251	110	2251	55
1252	410	2252	205
1253	930	2253	465
1254	1,450	2254	725
1255	1,970	2255	985
1401	320	2401	160
1402	320	2402	160
1403	280	2403	140
1451	1,510	1451	1,510
1452	110	2452	55
1453	1,300	2453	650
1501	1,300	2501	650
1502	470	2502	235
1503	630	2503	315
1460	130	1460	130
1807	50	1807	50
1806	180	1806	180
8021	40	8021	40
1809	750	2809	375
1810	750	2810	375
1801	750	2801	375
1802	900	1802	900
Other fee (specify) _____			

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$420.00)

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Date

Signature

Typed or printed name

SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	Luan C. Do	Registration No. (Attorney/Agent)	38,434	Telephone	(202) 585-8000
Signature				Date	October 2, 2003

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